

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH		6/25
O.I.P.E. CLASSIFIER		21	7/5/01
FORMALITY REVIEW	WN	778	8/11/01
RESPONSE FORMALITY REVIEW	A.M	JC 5811	10-24-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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831  
 80-571  
 10/24/01